Incomplete rosters will not be accepted.

## City of Albuquerque Parks and Recreation Official Basketball Roster Form

Date Due:	
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	Spring	Summer	Fall	Mixed	N	Ien's	Women's	Youth	
			Classification_						
roperty or employees of roperty that may be sust	the City of Albu tained in connect	querque and fron ion with any activ	rity in and about the pre	nands, actions, mises. I am in	suites, or pro good health	oceedings of ar and have no p	ny kind or nature hysical condition	I assume all r that would pre	any person, including isk of injury to my person and vent me from participating. I Conduct". I have read the
Vaiver of Liability and for									
Player's Nar		Playe	r's Signature	Pho	one		ntification #		ent's-Guardian Signature
(Print or Ty	pe)					State Issued	ID/Driver's Lice	ense	(Only if minor)
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Address			City		Stat	te	Emun	Zip_	
Iome Phone		Business		Cell			Manager		
Alternative Contact				Email				·	
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Explanation	Am	ount	Cash/Check/CC		Dat	e	Receipt #		Initials
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